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CONFIRMATION NO. 6041

Bib Data Sheet

SERIAL NUMBER 09/206,852	FILING OR 371(c) DATE 12/08/1998 RULE	CLASS 800	GROUP ART UNIT 1638	ATTORNEY DOCKET NO. 6550000028
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** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 01/05/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY MI	SHEETS DRAWING 9	TOTAL CLAIMS 16
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 1		
ADDRESS 7380 AIR MAIL				
TITLE METHODS FOR TRANSFORMING PLANTS				
FILING FEE RECEIVED 895	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	